

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number
83020 Pal-01333

CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY TYPE OF		OR	OTHER THAN SMALL ENTITY	
TOTAL CLAIMS			34				RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			ア Ýminus 20=		. 14		X\$ 9=		OR	X\$18=	252
INDEPENDENT CLAIMS			/ minus 3 =		* \$		X40=		OR	X80=	
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT				+135=		OR	+270=	
* If	the difference	in column 1 is	less than ze	ro, entei	"0" in c	olumn 2	TOTAL		OR	TOTAL	962
	C	LAIMS AS A	MENDED - PART II					A CANADA	の記憶を作	OTHER	THAN
		(Column 1)		(Colu		(Column 3)	SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus ·	**		=	X\$ 9=		OR	X\$18=	
AME	Independent	•	Minus	***	 	=	X40=		OR	X80=	
Ę	FIRST PRESE		+135= }	Parisa de Car	ΘĐὶ	, ∔270=					
5			-				TOTAL			TOTAL	
j	(Column 1) (Column 2					(Column 3)	ADDIT. FEE		J O	ADDIT. FEE	
		CLAIMS	CLAIMS		IEST			ADDI-			ADDI-
作		REMAINING AFTER			OUSLY	PRESENT EXTRA	RATE	TIONAL	p.g.	RATE	TIONAL
MENDMEN	Total	*	Minus	PAID	FOR	=	X\$ 9=	FEE	ØR.	X\$18=	FEE
	Independent	*	Minus	***		=	X40=			X80=	
₹	FIRST PRESE	NTATION OF M	ULTIPLE DEF	ENDEN	CLAIM		A40=	CLAN CHICAROLOGIC	ØR:	≈ 000=	of the s
	-						+135=		OR	+270=	
				TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE				
	(Column 1) (Colum					(Column 3)	المستعدد المستعدد				=
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9=		OR-	X\$18=	, ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;
ME	Independent		Minus	***		=	X40=		OR	X80=	
Ľ	FIRST PRESE	NTATION OF M	ULTIPLE DE	PLE DEPENDENT C				, *	1		
	If the entry in colu	ımn 1 is less than t	the entry in colu	ımn 2 wrii	te "0" in cr	olumn 3.	+135=		OR	+270=	*
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."											
	The "Highest Nur	mber Previously Pa	aid For" (Total o	r Indepen	dent) is th	e highest numbe	er found in the ap	opropriat bo	x in c	olumn 1.	. •